



**CONTRACT AWARD SHEET
DEPARTMENT OF PROCUREMENT MANAGEMENT**

Bid No. **ss9038-3/13-2**
Award Sheet

DIVISION

BID NO.: **ss9038-3/13-2**

PREVIOUS BID NO.:

TITLE: **AMBULANCE STRETCHERS MAINT & REPAIRS**

CURRENT CONTRACT PERIOD: **01/01/2012** through **12/31/2012**

Total # of OTRs: **3**

MODIFICATION HISTORY

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DPM Notes

APPLICABLE ORDINANCES

LIVING WAGE: **No**

UAP: **Yes**

IG: **Yes**

OTHER APPLICABLE ORDINANCES:

CONTRACT AWARD INFORMATION:

No Local Preference

No Micro Enterprise

No Full Federal Funding

No Performance Bond

No Small Business Enterprise (SBE)

No PTP Funds

No Partial Federal Funding

Yes Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT: **WEBB L. ROBIN**

PHONE: **305 375-4356**

FAX:

EMAIL: **DROBIN@MIAMIDADE.GOV**

DEPARTMENT OF PROCUREMENT MANAGEMENT
DIVISION

VENDOR NAME: **MEDCO EQUIPMENT REPAIR INC**
 DBA:
 FEIN: **650502047** SUFFIX : **01** **33186**
 STREET: **13047 SW 133 COURT** CITY: **MIAMI** ST: **FL** ZIP:
 FOB_TERMS: **DEST-P** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **-**

VENDOR INFORMATION:*CERTIFIED VENDOR**ASSIGNED MEASURES*Local Vendor: **Yes**

SBE	No	Set Aside	No	Bid Pref.	No
Micro Ent.	No	Selection Factor	No	Goal	No
Other:	Vendor Record Verified? No				

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
MR STEVEN F SIKES - PRESIDENT	305-2559538	-	305-2551996	EMSARSFLMEDCO@AOL.COM

Details:**ITEMS AWARDED Section:**

<u>Item #</u>	<u>Description</u>	<u>Qty</u>	<u>Unit Price</u>
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End of ITEMS AWARDED Section**AWARD INFORMATION Section**

BCC Award: DPM Award: **No**
 BCC Date: DPM Date: **01/24/2011**

Contract Amount: \$ 90,000.00**Additional Items Allowed:****Agenda Item No.:****Special Conditions:**

BPO INFORMATION Section:

1	ABCW1200139	
	Commodity ID	Commodity Name
	990-37	EMERGENCY MEDICAL AND AMBULANCE
	Department	Department Allocation
	FR	\$90,000.00

End of BPO Information Section